IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
BEFORE THE PATENT TRIAL AND APPEAL BOARD

In re Application of:	:	
Max Harry Weil, et al.	:	
Serial No.: 09/678,616	:	Group Art Unit: 3764
Filed: October 4, 2000	:	Examiner: Fenn C. Mathew
For: CHEST COMPRESSOR	:	

REPLY BRIEF TO EXAMINER'S ANSWER
35 CFR 1.193(b)(1)

Hon. Commissioner of Patents
Washington D.C. 20231

November 16, 2004
Los Angeles, CA 90024

Claim 15 describes chest-compressing apparatus such as shown in Applicant's Fig. 2, which includes an actuator having a cylinder (60) and piston (62). The primary novelty is that the piston (60) includes at least two telescoping piston parts (64, 66), both moved down by pressured fluid. This results in a long stroke (90) using an actuator of small height (92). As a result, the apparatus is more compact for easier carrying, and more patients can be stacked in an ambulance.

In the Examiner's Answer he cites Mills (3,978,854) in which a person presses a button 134 (Fig. 10) to the left against the force of a spring 136, to force a plunger 128 to the left. A piston part 146 telescopes in the plunger and is biased by a spring 154 to limit the amount of force applied by the piston part 146 to a diaphragm 44 that controls air flow to the patient. The purpose of the second piston part 146 in Mills is to limit the applied force, not to achieve a greater stroke in a piston of small length.

Claim 15 also describes the lower piston inside diameter being at least half the upper piston inside diameter. This assures that the lower piston applies a high force. In Mills his piston part 146 is not driven by fluid pressure.

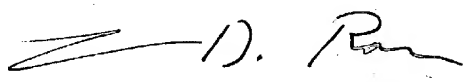
The Examiner's Answer says that Mills "covers the requirement that the piston parts are exposed to a pressurized fluid (air)". Applicant's claim 15 mentions a "source of pressurized fluid" and mentions telescoping piston parts "that are exposed to pressurized fluid" to force the telescoping piston against the patient's chest. This is very different from the situation in Mills where his parts are merely exposed to air in the environment. Applicant's pressured fluid (applicant mention 1000 psi on page 6, line 1) that forces pistons to depress a patient's chest are different from ambient air that does not push anything.

In discussing claim 16, the Examiner's Answer merely says that Waide and Cantrell meet the limitations of claim 16. Claim 16 describes a saucer-shaped stabilizer (e.g. 152 in applicant's Fig. 1) that has a center fixed to the actuator (16) that has an axis (146, Fig. 2). The stabilizer has a curved outer piston that extends "substantially completely around the axis".

In Waide, his bent legs 3 each extends about 60° around his actuator axis, for a total of 120° (one-third of a circle). This leaves about 66% of a full circle where his stabilizer does not rest on the patient's chest. In Cantrell, only his two strip-shaped adhesive strips 32a, 32b (Fig. 4) that lie on two strip-shaped rims 21 rest against a patient's chest. From Cantrell's Fig. 3, it can be seen that his strips each subtend an angle of 105°, for a total of 210°. This leaves two gaps of 70° each, or a total of gaps of about 140° of a full circle where his stabilizer does not rest against the patient. Since the references show total gaps of 210° or 140°, their stabilizer portions that rest on the patient's chest do not extend "substantially completely around the axis" as recited in claim 16.

For the above reasons, applicant believes that the Examiner's rejections of claims 15 and 16 should be reversed.

Respectfully submitted,



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